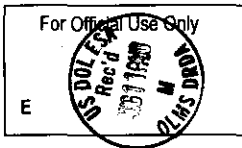


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.



1. File Number U - <u>6046</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Roy</u> <u>L</u> <u>McGhee III</u> P.O. Box, Bldg., Room No., if any _____ Street <u>1283 S Detroit Ave</u> City <u>Tulsa</u> State <u>Oklahoma</u> ZIP Code + 4 <u>74120</u>	4. Name, file number, and address of labor organization. Name <u>IAFF</u> Labor Organization File Number <u>000-317</u> P.O. Box, Building and Room Number, if any _____ Street <u>1750 New York Ave NW</u> City <u>Washington</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20006</u>
5. Position in labor organization. <u>Vice President 11th District</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct and complete. (See the section on penalties in the instructions.)

Signed Roy L. McGhee III On 7/7/2005 918-599-8176
Date Telephone Number

Name of Person Filing Roy McGhee III	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name Woodley & McGillivray</p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any: </p> <p>Street 1125 15th St NW Suite 400</p> <p>City Washington</p> <p>State District of Columbia ZIP Code + 4 20005</p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name: </p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any: </p> <p>Street: </p> <p>City: </p> <p>State: ZIP Code + 4: </p>	<p>11.a. Nature of such dealing.</p> <p>General Counsel</p> <hr/> <p>11.b. Approximate dollar value of such dealing. \$1,073,225</p> <p>12.a. Nature of interest held or income received.</p> <p>Dinner October 6, 2004</p> <hr/> <p>12.b. Amount. \$120</p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name Frasier, Frasier, & Hickman</p> <p>Trade Name, if any: </p> <p>P.O. Box, Bldg., Room No., if any: </p> <p>Street 1700 Southwest Blvd</p> <p>City Tulsa</p> <p>State Oklahoma ZIP Code + 4 74101</p>	<p>14.a. Nature of payment.</p> <p>Dec. '04 Fishing Trip to Mexico</p> <hr/> <p>14.b. Amount of payment. \$2,500</p>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	